

County of San Bernardino FAS

CONTRACT TRANSMITTAL

						FOR C	COUNTY	USE OF	VLY				
Е		New	Vendor Code				Dept.		Contract Number				
М	Х	Change				SC		Α	95-902 A-3				
Χ		Cancel											
Co	County Department					Dept.	Orgi	n.	Contractor's License No.				
Tra	Transitional Assistance Department												
Co	County Department Contract Representative				ntative		Ph. Ext.			Amount of Contract			
Air	Aimee Payne					3	88-03	860	Non-Financial				
F	Fund De		ot.	. Organization		Appr.	Obj/R	bj/Rev Source		Activity	GRC/PROJ/JOB Number		
A	AA	DPA		TAD	Í			1					
	Commodity Code					Estimated Payment Total by Fiscal Year							
				FY	Ame	ount	I/E) ŕ	Υ	Amount	I/D		
	Project Name												
<u>s</u>	School Outstationed EWs												
-									_				

	School Outstationed EWs							
	Ochoor Guistationed Ews		_					
CONTRACTOR San Bernardino	City Unified School District							
Birth Date N/A	Federal ID No. or	or Social Security No. N/A						
Contractor's Representative Judy D.	White							
Address 777 North "F" Street	San Bernardino, CA 92410	0-3090 Phone (909) 381-1201						
Nature of Contract: (Briefly descri	ribe the general terms of the	ne contract)						
This amendment to the Memoran July 1, 1999 through June 30, 20		OU) extends the period of the MOU by two years f	from					
This program is based on a multi- services and other services at sch		oach to provide health/mental health services, so	cial					
-	•	Is in order to provide parents/families residing in						
(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)								
Approved as to Legal Form	Reviewed as to Contract Comp	pliance Reviewed for Processing						
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Regina Coleman, County Counsel	Don Larkin, Contract Administ	strator Agency Administrator/CAO						